

Q&A

Q. Why is this solution the best option for us ?

This solution falls under the 3 given constraints given before as assumption. All though a clear constraint was not given in the challenge, it is good for a system to be considered performant and not suboptimal/subpar to attain certain targets. This solution would definitely cost less than 312'000 USD, the alpha release could be done within the first **90 days** (see **annex B** for full 12 month production line), and of 1300 caregivers **all** would have deployed the solution on their device in the first 3 months and most certainly all would have the solution accessories at hand by the end of the first 3 quarters (remote/autopilot Drone).

Q. How does the solution work and how can it be used by our caregivers in the field?

This solution allows a live intercommunication channel amongst caregivers and mentors, docs with also the patient being the key protagonist. It allows for incosistent/low singling, as it will be in lossy format (thanks to **Agora** lossy compression and custom dynamic bitrate settings), will fallback to audio only and allows the caregiver to free her hands at any given point in time with a small solution deployment such as the Drone or tripod.

On the other hand from the mentor's side this solution can allow for greatly improved **FOV** (field of View) and device support. By allowing him to use a Mac (thanks to **Catalyst**) an iPad and or an iPhone.

He can also draw, give highlight signals for key points of interest to the caregiver and manually pilot accessories such as Drone (**Parrot SDK** and/or **AirMap SDK** for autopilot only), as seen in video/pics and as technically explained in **Annex B**



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Q. What are the chances and the challenges for the solution?

The chance of this solution being fully developed are high as the constraints apply for only the iOS solution, from there they may be other roadmap pivots, planning as there could be particular demands to train and or assist caregivers with extended accessories (such as drones).

It must also be noticed with market becoming more and more mature better health solutions and more precise hardware will be available.

The chance of succeeding the outlined 12 month roadmap are nearly 100% as this is not an overly complicated solution, the chances of wanting to stick to only this solutions are not vastly near 70-80% as the patients and caregivers will be a crucial part of the PDD (production driven development phase) in which the products and app will **NEED** to be adjusted/refined

Q. How does storing the obtained data work on the device?

The data stored on the device, such as Media of patient and local videos, and/or calls are stored with CoreData and can be guaranteed to be protected for sensitive information through framework EU compliant NIST regulations ([more here](#) and [how to set it up here](#))

The data stored with CloudKit for cloud also is compliant and sent through only encrypted channels.

On opening the app Both the caregiver, guidance assistant and patient must sign an agreement for third party content observation record, else this will not be stored on device is patient is unwilling/not able to judge.

Cuckooo will still work normally but will not store information, which will be 'one-shot' only

